

ISSUE SLIP STAPLE AREA (for additional cross references)

| POSITION | INITIALS | ID NO. | DATE |
|---------------------------|----------|--------|----------|
| FEE DETERMINATION | He | | 04/18/01 |
| O.I.P.E. CLASSIFIER | | 48 | 5/9/01 |
| FORMALITY REVIEW | SD | 55 | 6/7/01 |
| RESPONSE FORMALITY REVIEW | | | |

INDEX OF CLAIMS

✓ Rejected N Non-elected
 = Allowed I Interference
 - (Through numeral)..... Canceled A Appeal
 + Restricted O Objected

| Claim | Date |
|----------|---------|
| Final | |
| Original | |
| 1 | 4/12/02 |
| 2 | ✓ |
| 3 | ✓ |
| 4 | ✓ |
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| Claim | Date |
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| Claim | Date |
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REST AVAILABLE COPY

If more than 150 claims or 10 actions
 staple additional sheet here

(LEFT INSIDE)